

08/31/01

JC944 U.S. PTO

UTILITY  
PATENT APPLICATION  
TRANSMITTAL

Attorney Docket No.:

IA00006

First Inventor:

Juergen Reinold et al.

Title:

VEHICLE ACTIVE NETWORK WITH FAULT TOLERANT  
DEVICES

Express Mail Label No.:

EL568749643US

(Only for new nonprovisional applications under 37 CFR 1.53(b))

APPLICATION ELEMENTS  
(see MPEP chapter 600 concerning  
utility patent application contents)

ADDRESS TO:

Assistant Commissioner for Patents  
Box Patent Application  
Washington, D.C. 20231

1. ☒ Fee Transmittal Form in duplicate  
(Submit an original and a duplicate for fee processing)
2. ☐ Applicant claims small entity status  
See 37 CFR 1.27
3. ☒ Specification Total Pages   
(preferred arrangement set forth below)  
-Descriptive title of the invention  
-Cross Reference to Related Applications  
-Statement Regarding Fed sponsored R&D  
-Reference to sequence listing, a table,  
-Background of the Invention  
-Brief Summary of the Invention  
-Brief Description of the Drawings (if filed)  
-Detailed Description  
-Claim(s)  
-Abstract of the Disclosure
4. ☒ Drawing(s) Total Sheets
5. ☒ Oath or Declaration  
a. ☐ Newly executed (original or copy)  
b. ☐ Copy from a prior application (37  
CFR 1.63(d)) (for continuation/ divisional with  
Box 18 completed)  
i. ☐ DELETION OF INVENTOR(S)  
Signed statement attached deleting  
inventor(s) named in the prior application,  
see 37 CFR 1.63(d)(2) and 1.33(b).
6. ☐ Application Data Sheet under 37 CFR 1.76

7. ☐ CD-ROM or CD-R in duplicate, large  
table or Computer Program (Appendix)
8. ☐ Nucleotide and/or Amino Acid Sequence  
(if applicable, all necessary)  
a. ☐ Computer Readable Form (CFR)  
b. ☐ Specification Sequence Listing on:  
i. ☐ CD-ROM or CD-4 (2 copies);  
ii. ☐ or paper  
c. ☐ Statements verifying identify of above copies

## ACCOMPANYING APPLICATION PARTS

9. ☐ Assignment Papers (cover sheet & document(s))
10. ☐ 37 CFR 3.73(b) ☐ Power of Attorney  
Statement (when there is an assignee)
11. ☐ English Translation Document (if applicable)
12. ☐ IDS ☐ Copies of IDS Citations
13. ☐ Preliminary Amendment
14. ☒ Return Receipt Postcard (MPEP 503)
15. ☐ Certified Copy of Priority Document
16. ☐ Nonpublication Request under 35 U.S.C.  
122(b)(2)(B)(i). Applicant must attach form  
PTO/SB/35 or its equivalent.
17. ☐ Other: \_\_\_\_\_

18. IF A CONTINUING APPLICATION, check appropriate box and supply the requisite information below and in a preliminary amendment:

☐ Continuation☐ Divisional☐ Continuation-in- Part (CIP)Prior Appl. No. 

Prior Appl. information:

Examiner: Group/Art Unit: 

For CONTINUATION OR DIVISIONAL APPS only: The entire disclosure of the prior application, from which an oath or declaration is supplied under Box 5b, is considered a part of the disclosure of the accompanying continuation or divisional application and is hereby incorporated by reference. The incorporation can only be relied upon when a portion has been inadvertently omitted from the submitted application parts.

## 19. CORRESPONDENCE ADDRESS

☒ Customer Number or Bar Code Label

2 2 8 6 3

or ☐

Correspondence address below

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Name

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Registration No.

34,696

SIGNATURE

*S. Kevin Pickens*

Date

August 31, 2001

PTO/SB/17 (11-00)  <div style="text-align: center;"><b>FEE TRANSMITTAL</b></div> <p style="text-align: center;">Patent fees are subject to annual revision</p>		<div style="text-align: right;"><b>Complete if Known</b></div> <table border="1" style="width: 100%; border-collapse: collapse;"> <tr><td style="width: 50%;">Application Number</td><td style="width: 50%;"></td></tr> <tr><td>Filing Date</td><td></td></tr> <tr><td>First Named Inventor</td><td>Juergen Reinold</td></tr> <tr><td>Examiner Name</td><td></td></tr> <tr><td>Group Art Unit</td><td></td></tr> <tr><td>Attorney Docket No.</td><td>IA00006</td></tr> </table>		Application Number		Filing Date		First Named Inventor	Juergen Reinold	Examiner Name		Group Art Unit		Attorney Docket No.	IA00006
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TOTAL AMOUNT OF PAYMENT <b>(\$ 710.00)</b>															

  

METHOD OF PAYMENT	FEE CALCULATION (continued)																																																																																																																																																										
<p>1. <input checked="" type="checkbox"/> The Commissioner is hereby authorized to charge indicated fees and credit any overpayment to:</p> <p>Deposit Account Number    <u>13-4771</u></p> <p>Deposit Account Name    <u>Motorola, Inc.</u></p> <p><input checked="" type="checkbox"/> Charge Any Additional Fee Required Under 37 CFR 1.16 and 1.17</p> <p><input type="checkbox"/> Applicant claims small entity status. See 37 CFR 1.27</p> <p>2. <input type="checkbox"/> Payment Enclosed:</p> <p><input type="checkbox"/> Check    <input type="checkbox"/> Credit Card    <input type="checkbox"/> Money Order    <input type="checkbox"/> Other</p>	<p><b>3. 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\*\*OR NUMBER PREVIOUSLY PAID, IF GREATER. For Reissues, see above

<b>SUBMITTED BY</b>				<b>Complete (if applicable)</b>			
Name (Print/Type)    S. Kevin Pickens				Registration No.    34,696		Telephone    480-441-4207	
Signature <i>S. K. PL</i>				Mail Date		August 31, 2001	